Enhancing Health Equity in Newfoundland and Labrador Prisons:

The Implementation of a Hepatitis C Testing and Treatment Program

Overview

- Many individuals with Hepatitis C (HCV) do not know they are infected. Those at highest risk of contracting and spreading the disease are incarcerated individuals and people who inject druss.
- HCV is curable when treated with costly drugs called direct-acting antiviral tablets. If left untreated, negative outcomes occur, such as cirrhosis, liver cancer, liver disease, and death.
- Prior to July 2023, treatment was not available to individuals who were incarcerated in NL, due to gaps in medical insurance coverage. This contributed to low testing rates.
- Testing and treatment during incarceration is important because many individuals do not have a regular health-care provider upon release, have no fixed address and are hesitant to speak with a community provider due to stigma.
- Testing and treatment is important to prevent the spread of disease, resulting in a healthier population and long-term health system savings.



Goals

NL Health Services' Correctional Health Services (CHS) team is committed to supporting the World Health Organization's (WHO) goal of HCV elimination by 2030.

This goal will be accomplished by **increasing the testing rates** of HCV and **providing treatment** to all incarcerated individuals who test positive. This will prevent the spread of disease and improve population health outcomes.

Activities

- Support for the program was secured:
- CHS team identified the need for a structured approach to HCV testing and treatment.
 In Budget 2023, \$3.2 million in funding over two years was announced for HCV
- Treatment criteria and plan established to align with the Newfoundland and Labrador Prescription Drug Plan (NLPDP) approval criteria.
- Community transition plan was established for follow-up care and medication access upon release:
- Community providers for follow-up care (in-person and virtual).
- Medication access (expedited approval through NLPDP, urgent access to drug card, drug company compassionate care programs).
- · Data collection and tracking methods were established:
 - o Initial testing clinic at Her Majesty's Penitentiary (HMP).
 - Participation in pharmacist-led research study using less invasive point-of-care screening tests.
 - Manual database set up to track results and progress.



Intervention Overview

Upon admission to prison and upon request, individuals are screened for HCV using point-of-care tests. If positive, blood work is done to confirm active infection.

According to NLPDP guidelines, treatment starts only after two positive tests at least six months apart. Treatment lasts 8-12 weeks, with a follow-up blood test 12 weeks later.

All clients receive education on transmission and prevention of HCV and are referred to mental health and addiction services, if needed. During their first appointment, they are also enrolled in the drug company's compassionate care program. They are given information for follow-up care and medication access in the community in the event they are released unexpectedly.

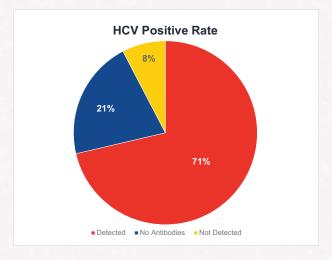
Outcomes/Progress

The first HCV treatment was initiated at HMP on July 18, 2023. Since then, the program has expanded to include all prisons within the province, treating more than 100 people to date.

The implementation of point-of-care screening and a targeted HCV treatment strategy in NL prisons has significantly improved screening and testing rates. A study from July 2020 to 2021 revealed a low screening rate of 4.5% among incarcerated individuals in NL. However, by 2024, the APPROACH study reported that 79% of individuals were screened at three rural facilities in NL. Since the launch of the HCV treatment program, screening has become a standard procedure at all correctional facilities across the province.

The introduction of the HCV treatment program has ensured that incarcerated individuals have access to the same treatment options as the public. Those who have taken part in the program have recognized the importance of testing and treatment, particularly while they are in custody.





At a time I thought things couldn't get worse, I was given a second chance.
I feel clean again.

- Individual who is incarcerated

Opportunities

- Work with Corrections to identify appropriate clinic times and space which will not impact prison operations; as well as how to best meet the testing and treatment needs of the high number of individuals on remand, who have unpredictable
- Eliminate the requirement for a second positive HCV test prior to treatment to allow for earlier treatment and cure
- Formally evaluate the current testing rates, treatment outcomes upon release, and client satisfaction surveys to assess success and areas for improvement.
 This will help determine if we are on track with the WHO's goal of HCV elimination by 2030 and measure the program's long-term outcomes.



